BOOK REVIEWS

THE WESTERN JOURNAL OF MEDICINE does not review all books sent to it by the publishers. A list of new books received is carried in the Advertising Section.

THE COMPREHENSIVE HANDBOOK OF BEHAVIORAL MEDICINE—Edited by James M. Ferguson, MD, Medical Director, Gifford Mental Health Center, Assistant Professor of Psychiatry, University of California, San Diego, School of Medicine and Department of Psychiatry, VA Medical Center, La Jolla; and C. Barr Taylor, MD, Assistant Professor of Psychiatry, Stanford University Medical Center, Stanford. Volume 1: SYSTEMS INTERVENTION, 304 pages, 1980, \$30.00; Volume 2: SYNDOMES & SPECIAL AREAS, 350 pages, 1981, \$30.00; Volume 3: EXTENDED APPLICATIONS & ISSUES, 344 pages, 1980, \$30.000. SP Medical & Scientific Books, 175-20 Wexford Terrace, Jamaica, NY 11432.

For those who apply the reductionist's approach to medical practice, The Comprehensive Handbook of Behavioral Medicine has a great deal to offer. The book is comfortably categorized into old and well-accepted subdivisions of medical disciplines that deal with the psyche and soma. However, for those who believe that the teachings of George Engel1 represent the new wave of behavioral science, the three-volume work edited by Ferguson and Taylor is a disappointment.

The stated goals of the editors are to have their book demonstrate the "application of applied behaviofal analysis and behavioral therapy techniques to medical problems." In an excellent introduction, the editors offer in a well-organized format the history and definitions needed to obtain an understanding of the behavioral sciences. Their review of behavioral theory and principles includes clarification of behavioral antecedents, consequences of behavior, and behavior therapies.

The book is addressed to practitioners and researchers; however, in general, the chapters written by qualified contributors are richer in research data, instruments and references than in pragmatic information for practicing physicians.

Some of the highlights of the book are sections on adherence, compliance, biofeedback and relaxation. Behavioral concepts are well presented in chapters that deal with modification or management of smoking, alcoholism, asthma, obesity, chronic pain, skin disorders, hypertension and enuresis.

As indicated in the introduction to the review, the major disappointment in the book is its failure to deal with the patient within the context of an integrated biopsychosocial model (the patient within the context of family and community). The indices for Volumes 1 and 2 do not list the family, social support or community. A follow-up of family and social group items in Volume 3 revealed a half-page on the influence of the family on the patient with a final caution: "[social] support was stressful for certain patients."

That the patient's behavior is profoundly influenced by family and sociocultural determinants is evidenced by a growing literature that is not included in the book under review. For example, the chapter on sexuality fails to deal with family dysfunction as a factor in sexual dysfunction. In the chapter on human performance in athletics, little attention was directed to anxiety as a consequence of pressure caused by peers, parents and coaches. Furthermore, the psychological trauma induced by persistent athletic failures that results in long-term problems with self-esteem is also not found in this section.

Family, community and cultural issues (Kleinman)² that pertain to behavioral problems in circulatory disease (Medalie),3 pregnancy (Nucchols)4 and asthma (Minuchin)⁵ were some of the areas neglected in The Comprehensive Handbook of Behavioral Medicine.

Since the editors wished to address the subject of behavioral science as it applies to medical problems, a section on physician/patient interaction should certainly have been included.

It is the impression of this reviewer that Ferguson and Taylor have put together a potpourri of chapters on behavioral medicine that will provide students of the field with valuable references (up to 1978). The reader will not, however, gain a "comprehensive" view of the behavioral sciences nor will the reader find the book a resource for understanding the behavior of the patient within the context of family and community.

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GENERAL OPHTHALMOLOGY-Ninth Edition-Daniel Vaughan. MD, Clinical Professor of Ophthalmology, University of California, San Francisco; and Taylor Asbury, MD, Professor of Ophthalmology, Director, Department of Ophthalmology, College of Medicine, University of Cincinnati; illustrated by Laurel V. Schaubert. Lange Medical Publishers, Drawer L, Los Altos, CA (94022), 1980. 410 pages, \$15.00.

General Ophthalmology is likely the textbook of ophthalmology most utilized by medical students, and with good reason. The latest edition draws on the experience of 20 years since the first edition appeared. Unlike some texts that deteriorate in succeeding editions, this one incorporates significant new material in each new edition and thus truly improves with age. Accordingly it is useful not only to medical students but to physicians who wish a quick reliable, readable reference.

The Ninth Edition is increased to 410 pages, compared with 379 for the preceding edition. It covers such current topics as electrophysiologic testing of visual function, genetic ophthalmology, and the CT scan in ophthalmology. The practical, useful nature of this text is indicated by the fact that it begins with a table summarizing the differential diagnosis of the red eye, and it concludes with a glossary to help in translation of those many illegible abbreviations used by ophthalmologists in consultation notes. Neuroophthalmology and ocular disorders associated with systemic disease receive appropriately heavy emphasis. Particularly useful now in medical school curricula lacking required ophthalmology instruction is a chapter on how to carry out ophthalmoscopic examination. Illustrations and references are excellent. The Ninth Edition is to be recommended with enthusiasm. ROBERT S. HEPLER, MD

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